

TRANSMITTAL  
FORM

Application Serial Number	09/617,566
Filing Date	July 17, 2000
First Named Inventor	Sawan
Group Art Unit	1616
Examiner Name	N. Levy
Attorney Docket No.	SUR-004DVCN
Patent No.	Not applicable
Issue Date	Not applicable

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## ENCLOSURES (check all that apply)

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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form<br><input checked="" type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]<br><input type="checkbox"/> Petition for Extension of Time<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)<br><input type="checkbox"/> Formal Drawing(s)<br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><input type="checkbox"/> Small Entity Statement<br><input type="checkbox"/> CD(s) for large table or computer program<br><input type="checkbox"/> Amendment After Allowance<br><input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><input type="checkbox"/> Appeal Brief (in triplicate)<br><input type="checkbox"/> Status Inquiry<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8<br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)<br>Version With Markings to Show Changes Made (2 pgs.); and<br>Exhibits A-E. |
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Sawan et al.  
SERIAL NO.: 09/617,566 GROUP NO.: 1616  
FILING DATE: July 17, 2000 EXAMINER: Neil S. Levy  
TITLE: Contact-Killing Antimicrobial Devices

Box Non-Fee Amendment  
Commissioner for Patents  
Washington, D.C. 20231

AMENDMENT AND RESPONSE

Sir:

This paper is submitted in response to the Office action mailed from the U.S. Patent and Trademark Office on June 6, 2002. Applicants believe that no petition or fee is required for consideration of this paper, as no shortened statutory period for response was set by the Office action. Nevertheless, if a petition or fee is required, please consider this as a conditional petition therefor and authorization to charge any required fee to Deposit Account No. 20-0531.

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